Hospital	City / Town		County	Teaching Status [1]	Fiscal Year End	Number of M	Number of Months Data	
Milton Hospital	N	/lilton	Norfolk	Nonteaching	09 / 30	12		
Financial Performance Indicators	FY01	FY02	FY03	FY04	FY05	MA Industry Median FY05	NorthEast US Median FY04 [2]	
Profitability Operating Margin Non-Operating Margin Total Margin Operating Surplus (Loss)	-7.00% 5.79% -1.21% (\$3,113,561)	-6.36% 3.17% -3.19% (\$2,627,591)	3.56% -13.23%	3.10% -1.50%	0.12% 3.53% 3.65% \$68,263	1.70% 1.25% 3.24%	not available	
Total Surplus (Loss)	(\$537,489)	(\$1,428,451)	, ,	` '	\$2,086,639			
Liquidity Current Ratio Days in Accounts Receivable Average Payment Period	2.16 37.69 65.71	1.75 34.79 59.47	43.61	33.40	1.10 35.86 64.09	1.58 41.79 51.91	49.17	
Solvency/Capital Structure Debt Service Coverage (Total) [3] Cashflow to Total Debt [4] Equity Financing	1.43 9.35% 60.94%	1.28 6.58% 61.41%	-9.69%		2.26 17.34% 59.89%	3.23 17.53% 41.74%	16.38%	
Other Total Net Assets Assets Whose Use is Limited Net Patient Service Revenue [5]	\$53,705,841 \$3,059,990 \$39,563,811	\$47,931,889 \$39,658,098 \$41,403,384	\$40,220,697	\$49,493,534	\$49,638,290 \$44,205,301 \$53,584,121	 	  	

## FY05 filing based on hospital's audited financial statements

- Notes:
  [1] According to the Medicare Payment Advisory Commission (MEDPAC), a major teaching hospital is one with at least 25 FTE residents per 100 inpatient beds.
  [2] NE US Median data from The "2006 Almanac of Hospital Financial & Operating Indicators." The Center for Healthcare Industry Performance Studies (CHIPS)/St. Anthony/Medicode INGENIX.
  [3] Blank values indicate a facility with no current long term debt in the period covered.
  [4] Blank values indicate a facility with no long term debt net of current portion in the period covered.
  [5] Net Patient Service Revenue includes Premium Revenue.

Data Sources: FY01 data is drawn from DHCFP-403 Cost Report, Schedule 23. FY02 - FY05 data drawn from DHCFP annual filing.

CAVEATS: FY01 - FY02 data is unaudited but reviewed by the Division for consistency with the Audited Financial Statements. FY03-05 data is reconciled to Audited Financial Statements. DHCFP filings may not reflect all of the financial resources available to the hospital resources available through associations with foundations or parents/affiliates. Financial information must be interpreted within the context of other factors, including, but not limited to, management plans, reimbursement changes, market behavior, and other factors affecting performance.

Comments: Hospitals may also submit comments which further explain or clarify specific data items. Any such disclosures are shown below.